

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER		12	4/9
FORMALITY REVIEW	#-5	766	05.30.01
RESPONSE FORMALITY REVIEW	M. H.	625	09.12.01

INDEX OF CLAIMS

- ✓ _____ Rejected
- _____ Allowed
- (Through numeral) _____ Canceled
- + _____ Restricted
- N _____ Non-elected
- I _____ Interference
- A _____ Appeal
- O _____ Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 40 actions
staple additional sheet here

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